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IDOH HSP Universal Services Service Standard

The Universal Standards listed below **are applicable to all service categories funded under the Ryan White Part B program**. These standards are compliant with the HRSA/HAB monitoring standards issued December 2013. Recipients are required by HRSA/HAB to adhere to these monitoring standards and as such, sub-recipients funded by the IDOH HIV Services Program (HSP).

| Standard | | Documentation |
|---|---|---|
| 1. Access to Care | | |
| Services must be provided i age, physical or mental chal criminal history, history of simmigration status, marital sorigin, primary/preferred lar religion, sexual orientation, and expression, socioeconor current/past health condition Services must be provided i with the Americans with Di Guidelines. For information Guidelines Sub-recipients must have we for clients on how to access services | lenges, creed, substance use, status, national nguage, race, gender identity mic status, or as accordance sability Act, refer to ADA | Policies and procedures |
| Sub-recipients must inform various HIV services and re available throughout their re Sub-recipients must have an policy describing how referenced. | sources egion internal 2. | Informational flyers, handouts, resource manuals, literature. Documentation in clients records of resource provided Internal policy describing how referrals will be tracked |
| 3. Staff Requirements | | |
| Sub-recipients must have we personnel policies and proced. Sub-recipients must offer state contracted service sub-recipies descriptions that address mit qualifications, core competer responsibilities. Sub-recipient must ensure the contracted service sub-recipies delivering direct services to have knowledge of the followa. HIV/AIDS Effects of HIV/AIDS-read and comorbidities on contracted services and their families. | edures aff and ients job nimum encies, and job nat staff and ients clients must wing: elated illnesses onsumers HIVAIDS on 2. 3. 4. 6. | Documentation of knowledge via formal education, trainings, or other methods. Types of documentation may include, but is not limited to medical degree, license/certification, training certificate, transcripts, staff interview Documentation of cultural competency and trauma-informed care training in personnel record Documentation of HIPPA training in personnel record |

others

- d. Current strategies for the management of HIV/AIDS
- e. HIV-related resources and services in IN
- 4. Subrecipient staff must have at a minimum, at hire and annually, trainings in culturally appropriate service delivery and trauma-informed care.
- 5. Sub-recipient staff must have documentation of HIPAA training completed at hire and annually.
- Sub-recipient must ensure that staff and contracted service sub-recipients receive ongoing supervision that is relevant and appropriate to their professional needs
- 7. Sub-recipient must ensure that staff and contracted service providers conduct business in a manner that ensures the confidentiality of clients and follows established protocols outlined in the Health Insurance Portability and Accountability Act (HIPAA) and the IN Public Health Code
- 8. New Sub-recipient staff must have completed the Universal HSP New Employee Checklist

procedures

8. Documentation within personnel file

- 4. Safety and Emergency Procedures
 - 1. Sub-recipient must ensure that services are provided in facilities that are clean, comfortable, and free from hazards
 - 2. Sub-recipient must have policies and procedures for the following:
 - Emergency Procedures that include, fire, severe weather, and intruder/weapon threat
 - b. Medical/Health Care Crisis
 - c. Infection Control and Transmission Risk
 - d. Crisis Management
 - e. Accident/Incident Reporting
 - f. Continuation of Operations Plan (COOP)
 - 3. Sub-recipient must ensure that staff and contracted service sub-recipients are trained and follow the safety and emergency procedures

- 1. Site visit observation
- 2. Policies and procedures, site visit observation, training certificates and/or signin sheets, staff interview

5. Eligibility

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- 1. Subrecipients must have established criteria for the provision of services that includes, at minimum:
 - a. Eligibility verification consistent with recipient requirements:
 - Maintaining legal Indiana residency;
 - ii. Proof of HIV status;
 - iii. Verifying Medicaid status;
 - iv. Confirming Federal Income Levels are at or under 300% per household size; and
 - b. Acknowledgement of payer of last resort checklist
 - c. Processes for applying clients for all eligible Ryan White parts available.

- 1. Subrecipient criteria for provision of service category
- 2. Service providers and sub-recipients must maintain documentation of current eligibility if providing HIV services reimbursable under the RWHAP Part B Program.
- 3. Documentation must be made available for review by IDOH upon request.

6. Confidentiality Related Documentation

- 1. Sub-recipient must have a written statement outlining consumer rights that, at minimum, includes:
 - a. Nature of services offered
 - b. The ability to terminate service at any time
 - c. Transfer and discharge procedures
 - d. Client progress review
 - e. Access to client records
 - f. Scheduling, rescheduling, and canceling appointments
 - g. Drug and alcohol use on premises
 - h. Weapons on premises
 - i. Acts of abuse towards staff, property, or services
 - Actions that may be taken because of a client violating responsibilities, which may include termination of services
- Sub-recipient must have an objective process to address and track clients' grievances
- 3. Sub-recipient must have policies and procedures to ensure that clients' medical records and other personal health information are:
 - Securely faxed, emailed, or phoned, and safely transported during the courses of conducting business
 - b. Securely stored electronically with limited access

- 1. Documentation of signed and dated Clients Rights and Responsibilities
- 2. Policies and procedures, documentation of signed and dated grievance policy, and resolution of grievance
- 3. Policies and procedures, staff interview, site visit observation, training related to the protection of personal health information.

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evaluation methods to improve service

delivery

c. Shared with third parties in accordance with HIPAA d. Sub-recipients must ensure that client's records are maintained in a secure location 6. Client Satisfaction 1. Sub-recipient must establish evaluation 1. Quality Management Committee meeting methods to assess client satisfaction and notes/minutes, client satisfaction receive feedback on services using any of the survey/results, visual verification of suggestion box or other client input following methods: a. Client satisfaction survey mechanisms during site visit, notes, or b. Suggestion box or other client input reports from focus groups and/or public mechanism meetings 2. Quality Improvement Plan, modification c. Focus groups and/or public meetings to service delivery policies and procedures d. Consumer Advisory Board 2. Sub-recipients must use results from based on feedback, inclusion of client

feedback in internal training/staff

communications